

Statement of Economic Interests
For Designated Employees**RECEIVED**

DEC 19 1996

DIST. SECRETARY'S OFF.

A PUBLIC DOCUMENT
1995/96

(Type or Print in Ink)

NAME OF FILER <u>PETER W. SNYDER</u>		POSITION TITLE <u>BOARD OF DIRECTORS</u>
NAME OF AGENCY <u>BAY AREA RAPID TRANSIT DISTRICT</u>		NAME OF DIVISION, UNIT, BOARD, BUREAU, ETC. (IF APPLICABLE)
MAILING ADDRESS <u>11497 SILVERGATE DR., DUBLIN, CA 94568</u>		DAYTIME TELEPHONE NUMBER <u>(510) 828-2738</u>

IF YOU ARE FILING AN
EXPANDED STATEMENT:

Name of Agency

Office/Position

TYPE OF STATEMENT:

☒ **ASSUMING OFFICE STATEMENT**

Date Assumed Office or, if you are an Appointed Official subject to confirmation, enter the Date Appointed or Nominated:

12/6/96
mo. day yr.☐ **ANNUAL STATEMENT**The period covered is January 1, 1995 through December 31, 1995.☐ **LEAVING OFFICE STATEMENT**The period covered is January 1, 199 through the date you left your designated position.

Date left designated position:

mo. day yr.

☐ **INITIAL STATEMENT** (Complete this section ONLY if your position has been recently designated or if you are filing under a new conflict of interest code for your agency.)

Effective date of code:

mo. day yr.

☐ **CANDIDATE STATEMENT** (Complete only if required by the conflict of interest code for the jurisdiction in which you are seeking elective office.)**VERIFICATION**

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 12/19/96 at DUBLIN, CA
(month, day) (year) (city and state)

SIGNATURE

Peter W. Snyder

Check the appropriate box for each schedule. Complete this summary page after you have carefully reviewed your disclosure category, contained in your agency's conflict of interest code, to determine what types of interests must be reported. Instructions are also provided for each schedule. If a schedule does not apply to your disclosure category, check the box "No Reportable Interests."

Schedule A - INVESTMENTS

SCHEDULE COMPLETED
AND ATTACHEDNO REPORTABLE
INTERESTS

(Not Held By A Business Entity Or Trust)

☐☒

Schedule B - INTERESTS IN REAL PROPERTY

(Not Held By A Business Entity Or Trust)

☐☒Schedule C-1 - INTERESTS IN REAL PROPERTY HELD BY A BUSINESS
ENTITY OR TRUST☐☒

Schedule C-2 - INVESTMENTS HELD BY A BUSINESS ENTITY OR TRUST

☐☒

Schedule D - INCOME

(Other Than Loans and Gifts)

☒☐Schedule D-1 - INCOME--TRAVEL PAYMENTS, ADVANCES,
REIMBURSEMENTS☐☒

Schedule E - INCOME--LOANS

(Received Or Outstanding During The Reporting Period)

☐☒

Schedule F - INCOME--GIFTS

☐☒

Schedule G - BUSINESS POSITIONS

☒☒Schedule H-1 - COMMISSION INCOME RECEIVED BY BROKERS,
AGENTS AND SALESPERSONS☐☒

Schedule H-2 - INCOME AND LOANS TO A BUSINESS ENTITY OR TRUST

☐☒

Schedule H-3 - INCOME FROM RENTAL PROPERTY

☐☒

AFTER THE SUMMARY PAGE HAS BEEN COMPLETED, PLEASE RECYCLE THOSE SCHEDULES ON WHICH YOU HAVE NO REPORTABLE INTERESTS.

NAME

GER W. SNYDER

Schedule D - Income
(Other Than Loans And Gifts)

(SEE INSTRUCTIONS ON PRECEDING PAGE)

GROSS INCOME RECEIVED:

NAME OF THE SOURCE OF INCOME GENERAL AUTO PARTS	<input type="checkbox"/> \$250-\$1,000 <input type="checkbox"/> \$1,001-\$10,000 <input checked="" type="checkbox"/> Over \$10,000
ADDRESS 4425 E-14th ST., OAKLAND, CA 94601	
NATURE OF BUSINESS ACTIVITY, IF ANY AUTO PARTS SALES	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED SALES CONSULTING	
NAME OF THE SOURCE OF INCOME WASTE MANAGEMENT DE ALA. COUNTY.	<input type="checkbox"/> \$250-\$1,000 <input type="checkbox"/> \$1,001-\$10,000 <input checked="" type="checkbox"/> Over \$10,000
ADDRESS 172 98th AVE, OAKLAND, CA	
NATURE OF BUSINESS ACTIVITY, IF ANY WASTE MANAGEMENT -	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED CONSULTING / GOVT. RELATIONS	
NAME OF THE SOURCE OF INCOME SHEA HOMES	<input type="checkbox"/> \$250-\$1,000 <input checked="" type="checkbox"/> \$1,001-\$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS 25 METRO DR., SAN JOSE, CA	
NATURE OF BUSINESS ACTIVITY, IF ANY HOME BUILDING & LAND DEVELOPMENT	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED CONSULTING / GOVT. RELATIONS	
NAME OF THE SOURCE OF INCOME WARMINGTON HOMES.	<input type="checkbox"/> \$250-\$1,000 <input checked="" type="checkbox"/> \$1,001-\$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS 3160 CROW CANYON PLACE, SAN RAMON, CA	
NATURE OF BUSINESS ACTIVITY, IF ANY HOME BUILDING / GOVT. RELATIONS	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED CONSULTING / GOVT. RELATIONS.	

☐ If additional space is needed, check box and attach an additional Schedule D.

NAME

Robert W. Snyder

Schedule G -- Business Positions

(SEE INSTRUCTIONS ON PRECEDING PAGE)

NAME OF ENTITY GENERAL AUTO PARTS		ADDRESS OF ENTITY 4425-E. 14th ST., OAKLAND, CA	
NATURE OF BUSINESS ACTIVITY AUTO PARTS SALES		YOUR JOB TITLE OR POSITION SALES CONSULTING	
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		IF NO <input type="checkbox"/> POSITION COMMENCED ON _____ PLEASE INDICATE: POSITION TERMINATED ON _____	
NAME OF ENTITY		ADDRESS OF ENTITY	
NATURE OF BUSINESS ACTIVITY		YOUR JOB TITLE OR POSITION	
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF NO <input type="checkbox"/> POSITION COMMENCED ON _____ PLEASE INDICATE: POSITION TERMINATED ON _____	
NAME OF ENTITY		ADDRESS OF ENTITY	
NATURE OF BUSINESS ACTIVITY		YOUR JOB TITLE OR POSITION	
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF NO <input type="checkbox"/> POSITION COMMENCED ON _____ PLEASE INDICATE: POSITION TERMINATED ON _____	
NAME OF ENTITY		ADDRESS OF ENTITY	
NATURE OF BUSINESS ACTIVITY		YOUR JOB TITLE OR POSITION	
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF NO <input type="checkbox"/> POSITION COMMENCED ON _____ PLEASE INDICATE: POSITION TERMINATED ON _____	
NAME OF ENTITY		ADDRESS OF ENTITY	
NATURE OF BUSINESS ACTIVITY		YOUR JOB TITLE OR POSITION	
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF NO <input type="checkbox"/> POSITION COMMENCED ON _____ PLEASE INDICATE: POSITION TERMINATED ON _____	
NAME OF ENTITY		ADDRESS OF ENTITY	
NATURE OF BUSINESS ACTIVITY		YOUR JOB TITLE OR POSITION	
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF NO <input type="checkbox"/> POSITION COMMENCED ON _____ PLEASE INDICATE: POSITION TERMINATED ON _____	
NAME OF ENTITY		ADDRESS OF ENTITY	
NATURE OF BUSINESS ACTIVITY		YOUR JOB TITLE OR POSITION	
POSITION HELD THROUGH ENTIRE REPORTING PERIOD? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF NO <input type="checkbox"/> POSITION COMMENCED ON _____ PLEASE INDICATE: POSITION TERMINATED ON _____	

☐ If additional space is needed, check box and attach an additional Schedule G.